

OCT-30-2006 MON 03:10 PM

FAX NO.

RECEIVED
CENTRAL FAX CENTER

P. 01/02

OCT 30 2006



SCHEEF & STONE, L.L.P.

Legal counsel based on solid principles.

Facsimile Information Sheet

DATE: October 30, 2006 CLIENT MATTER 1578.602

TO: Group Art Unit 2661

FIRM/COMPANY NAME: United States Patent and Trademark Office

FACSIMILE NO. 571-273-8300 TELEPHONE NO. _____

RE: US Patent Application No. 10/774,059

TOTAL NUMBER OF PAGES 2 (including this Facsimile Information Sheet)

FROM: Eleanor Scott (214) 706.4204 (direct dial)

MESSAGE:

Please see attached correspondence.

CONFIDENTIALITY NOTE: The documents accompanying this telefax transmission contain information belonging to SCHEEF & STONE, L.L.P. that is confidential and legally privileged. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any examination, disclosure, copying, distribution or the taking of any action in reliance on, or with respect to, the contents of this telecopied information is strictly prohibited. If you have received this telefax in error, please immediately notify the person identified as the sending person by collect person-to-person telephone call at the number set forth above to arrange for return of the original document to us at our expense.

**IF YOU DO NOT RECEIVE ALL OF THE PAGES INDICATED ABOVE,
PLEASE CALL THE FOLLOWING NUMBER AS SOON AS POSSIBLE: 214.706.4200**

RECEIVED
CENTRAL FAX CENTER

OCT 30 2006

PTO/SB/122 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS
Application**Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

Application Number	10/774,059
Filing Date	February 6, 2004
First Named Inventor	Pedlar
Art Unit	2661
Examiner Name	Not yet assigned
Attorney Docket Number	1578.602

Please change the Correspondence Address for the above-identified patent application to:

☒ Customer Number : 54120

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86).
- ☒ Attorney or Agent of record. Registration Number 33,922
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed
Name Robert H. Kelly

Signature

Date

Telephone 214-706-4200

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.